| PATENT ADDITION EEE DETERMINATION   |  |                     |                     |                  |              |                  |          | Application or Docket Number |               |          |                    |               |  |
|---|--|---------------------|---------------------|------------------|--------------|------------------|----------|------------------------------|---------------|----------|--------------------|---------------|--|
| PATENT APPLICATION FEE DETERMINATION RECOR  |  |                     |                     |                  |              |                  |          |                              | 09-           | 75 8     | 3346               | ?             |  |
| CLAIMS AS FILED - PART I  |  |                     |                     |                  |              |                  |          | SMALL ENTITY                 |               |          | OTHER THAN         |               |  |
| Τí  | OTAL CLAIMS                                    |                     | (Columi             |                  | (Column 2)   |                  |          | TYPE                         |               | OR       |                    |               |  |
|   |  |                     | 36                  |                  |              |                  |          | RATE                         | FEE           | ]        | RATE               | FEE           |  |
| FOR   |  |                     | NUMBER FILED        |                  | NUMBER EXTRA |                  | Ŀ        | BASIC FE                     | 355.00        | OR       | BASIC FEE          | 710.00        |  |
| TOTAL CHARGEABLE CLAIMS   |  |                     | <b>16</b> minus 20= |                  | . 16         |                  |          | X\$ 9=                       |               | OR       | X\$18=             | 28806         |  |
| INDEPENDENT CLAIMS  |  |                     | 5 minus 3 =         |                  | 2            |                  |          | X40=                         |               | OR       | X80=               | 160,00        |  |
| MI  | JLTIPLE DEPE                                   | NDENT CLAIM P       | RESENT              |                  |              |                  | +135=    |                              |               | 7 1      |                    | 100 (00       |  |
| * If the difference in column 1 is less than zero, enter "0" in column 2  |  |                     |                     |                  |              |                  |          |                              | <del> </del>  | OR       | +270=              |               |  |
| CLAIMS AS AMENDED - PART II   |  |                     |                     |                  |              |                  |          | TOTAL                        |               | OR       | TOTAL              | 1,15800       |  |
|   | (Column 1) (Column 2) (Column 3)               |                     |                     |                  |              |                  |          | SMALL                        | . ENTITY      | OR       | OTHER<br>SMALL     |               |  |
| AMENDMENT A   |  | CLAIMS<br>REMAINING |                     | HIGH             | EST          |                  | Г        |                              | ADDI-         | 7<br>7   | J.II.A.E.E.        | ADDI-         |  |
|   |  | AFTER<br>AMENDMENT  |                     | PREVIO<br>PAID   | DUSLY        | PRESENT<br>EXTRA |          | RATE                         | TIONAL<br>FEE |          | RATE               | TIONAL        |  |
|   | Total  | .36                 | Minus               | . a              | 0            | = 16             | Ī        | X\$ 9=                       |               | OR       | X\$18=             | 166           |  |
|   | Independent                                    | NTATION OF MI       | Minus               | 2                | CLAIM        | =2               |          | X40=                         |               | OR       | X80=               |               |  |
| <u> </u>  |  |                     | JETIFLE DE          | PENDENT          | CLAIM        |                  |          | +135=                        |               | OR       | +270=              |               |  |
|   |  |                     |                     |                  |              |                  | <u> </u> | TOTAL                        |               | OR       | TOTAL              |               |  |
|   |  | (Column 1)          |                     | (Colun           | nn 2)        | (Column 3)       | AL       | JUIT. PEC                    | ·             | <b>.</b> | ADDIT. FEE         |               |  |
| AMENDMENT B   |  | CLAIMS<br>REMAINING |                     | HIGH<br>NUM      |              | PRESENT          | Г        |                              | ADDI-         | 1 [      |                    | ADDI-         |  |
|   |  | AFTER<br>AMENDMENT  | 3.                  | PREVIO<br>PAID I |              | EXTRA            | L        | RATE                         | TIONAL<br>FEE |          | RATE               | TIONAL<br>FEE |  |
|   | Total  | •                   | Minus               | ••               |              | =                |          | X\$ 9=                       |               | OR       | X\$18=             |               |  |
|   | Independent<br>FIRST PRESE                     | NTATION OF MU       | Minus               | ENDENT           | CI AIM       |                  |          | X40=                         |               | OR       | X80=               |               |  |
|   |  |                     |                     |                  |              | <del> </del>     |          | +135=                        |               | OR       | +270=              |               |  |
|   |  |                     |                     |                  |              |                  |          | TOTAL<br>DIT, FEE            |               | OR ,     | TOTAL<br>ODIT, FEE |               |  |
|   |  | (Column 1)          |                     | (Colum           |              | (Column 3)       |          |                              |               | • •      |                    |               |  |
| AMENDMENT C   |  | CLAIMS<br>REMAINING |                     | HIGHE<br>NUMB    | ER           | PRESENT          | Г        |                              | ADDI-         | [        |                    | ADDI-         |  |
|   |  | AFTER<br>AMENDMENT  |                     | PREVIO<br>PAID F |              | EXTRA            | R.       | RATE 1                       | TIONAL<br>FEE |          | RATE               | TIONAL<br>FEE |  |
|   | Total  | •                   | Minus               |                  |              | <b>n</b>         |          | X\$ 9=                       |               | OR       | X\$18=             |               |  |
|   | Independent                                    | •                   | Minus               | ***              |              | =                | -        | X40=                         |               |          | <del></del>        |               |  |
|   | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |                     |                     |                  |              |                  |          | A4U=                         |               | OR       | X80=               |               |  |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.   |  |                     |                     |                  |              |                  |          |                              |               | OR       | +270=              |               |  |
| " If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  |  |                     |                     |                  |              |                  |          |                              |               | OR A     | TOTAL              |               |  |
| The "Highest Number Previously Paid For" (Notal or Independent) is the highest number found in the appropriate box in column 1. |  |                     |                     |                  |              |                  |          |                              |               |          |                    |               |  |
|   | OTO PT   |                     |                     |                  |              |                  |          |                              |               |          |                    |               |  |

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